

APPLICATION DATA SHEET

APPLICATION INFORMATION

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|---|----------------------------|
| <i>Application number::</i> | <i>New Application</i> |
| <i>Filing Date::</i> | 07/24/03 |
| <i>Application Type::</i> | US CIP |
| <i>Subject Matter::</i> | Utility |
| <i>Suggested Classification::</i> | None |
| <i>Suggested Group Art Unit::</i> | None |
| <i>CD-ROM or CD-R?::</i> | None |
| <i>Sequence Submission?::</i> | No |
| Title:: | ASSAY FOR OXIDATIVE STRESS |
| <i>Attorney Docket Number::</i> | 88530 |
| <i>Request for Early Publication?::</i> | No |
| <i>Request for Non-Publication?::</i> | No |
| <i>Suggested Drawing Figure::</i> | 1 |
| <i>Total Drawing Sheets::</i> | 8 |
| <i>Small Entity?::</i> | Yes |
| <i>Petition Included?::</i> | No |
| <i>Petition Type::</i> | N/A |
| <i>Licensed US Govt. Agency::</i> | |
| <i>Contract or Grant Numbers::</i> | |
| <i>Secrecy Order in Parent Appl.?::</i> | No |

APPLICANT INFORMATION

| | |
|---|---------------------------|
| Applicant Authority Type:: | Inventor |
| Primary Citizenship Country:: | Iran |
| Given Name:: | Ali |
| Middle Name:: | |
| Family Name:: | Banan |
| Name Suffix:: | |
| City of Residence:: | Gurnee |
| State or Province of Residence:: | Illinois |
| Country of Residence:: | USA |
| Street of Mailing Address:: | 4117 Bitternut Lane, #104 |
| City of mailing address:: | Gurnee |
| State or Province of mailing address:: | Illinois |
| Country of mailing address:: | USA |
| Postal or Zip Code of mailing address:: | 60031 |
| | |
| Applicant Authority Type:: | Inventor |
| Primary Citizenship Country:: | USA |
| Given Name:: | Ali |
| Middle Name:: | |
| Family Name:: | Keshavarzian |
| Name Suffix:: | |
| City of Residence:: | Evanston |
| State or Province of Residence:: | Illinois |
| Country of Residence:: | USA |
| Street of Mailing Address:: | 2300 Lincolnwood Drive |
| City of mailing address:: | Evanston |
| State or Province of mailing address:: | Illinois |
| Country of mailing address:: | USA |
| Postal or Zip Code of mailing address:: | 60201 |

CORRESPONDENCE INFORMATION

U.S. PTO Customer Number:: 24628
Phone Number:: (312) 655-1500
Fax Number:: (312) 655-1501
E-Mail address::

REPRESENTATIVE INFORMATION

| | |
|----------------------------------|--------|
| Registration Number One:: | 24,003 |
| Registration Number Two:: | 22,839 |
| Registration Number Three:: | 28,903 |
| Registration Number Four:: | 27,429 |
| Registration Number Five:: | 25,060 |
| Registration Number Six:: | 22,053 |
| Registration Number Seven:: | 27,466 |
| Registration Number Eight:: | 29,434 |
| Registration Number Nine:: | 29,054 |
| Registration Number Ten:: | 29,381 |
| Registration Number Eleven:: | 34,044 |
| Registration Number Twelve:: | 27,600 |
| Registration Number Thirteen:: | 34,137 |
| Registration Number Fourteen:: | 39,724 |
| Registration Number Fifteen:: | 37,963 |
| Registration Number Sixteen:: | 38,110 |
| Registration Number Seventeen:: | 39,021 |
| Registration Number Eighteen:: | 41,217 |
| Registration Number Nineteen:: | 34,177 |
| Registration Number Twenty:: | 40,687 |
| Registration Number Twenty One:: | 45,759 |
| Registration Number Twenty Two:: | 34,177 |

Registration Number Twenty Three:: 41,021
Registration Number Twenty Four:: 27,888
Registration Number Twenty Five:: 48,435

DOMESTIC PRIORITY INFORMATION

This application is based on a:: Continuation-in-part
Application One:: 10/263,207
Filing Date:: October 2, 2002
which is a::